ale.		PART B	- FEE(S)	TRANSMITTAL	0	`	
78976	omplete and sept this form, together with applicable fee(s), to: MAR 1 4 2006				Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450		
13				Fax (571) 273-2885			
TRUCTIONS: To form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appearing a All funds correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated the projected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance the notifications.							
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of Fee(s) Transmittal. In papers. Each addition	of mailing can only be used his certificate cannot be used nal paper, such as an assignn	for domestic mailings of the for any other accompanying	
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KNOBBE MARTENS OLSON & BEAR LLP 2040 MAIN STREET FOURTEENTH FLOOR IRVINE, CA 92614 Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the States Postal Service with sufficient postage for first class mail in an addressed to the Mail Stop ISSUE FEE address above, or being transmitted to the USPTO (571) 273-2885, on the date indicated before							
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02 F <u>C:1504</u>	300.00 OP			March	10,2006	(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED INV			ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/660,357 09/10/2003 Menashe Bar-Eli ABGENIX.030C1 7855 TITLE OF INVENTION: USE OF ANTIBODIES AGAINST THE MUC18 ANTIGEN							
TITLE OF INVENTION.	USE OF ANTIBODIES AGA	IINST THE MOCI	8 ANTIGEN	·			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$300	\$1700	03/13/2006	
EXAMINER		ART UNIT		CLASS-SUBCLASS	٦		
BLANCHARD, DAVID J		1643		424-142100	-		
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47: Rev 03-02 or more recent) attached. Use of a Customer				2. For printing on the patent front page, list 1) the names of up to 3 registered patent attorneys or agents OR, alternatively, 2) the name of a single firm (having as a member a egistered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is isted, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Abaenix, Inc. 6701 Kaiser Drive							
Fremont, CA 94555							
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government							
4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed.							
Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached.							
Advance Order - # of Copies The Director is hereby authorized by charge the required fee(s), or credit any overpayment, Deposit Account Number 11 - 14 to (enclose an extra copy of this form).							
5. Change in Entity Status (from status indicated above) \[\begin{align*}							
The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.							
Authorized Signature Shoule R. Mellson				Date March 10, 2006			
Typed or printed name	Sheila L. C	ibson	Registration No. 54, 120				
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.							

Docket No.: ABGENIX

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ISSUE FEE TRANSMITTAL LETTER

pricant

: Bar-Eli et al.

App. No

: 10/660,357

Filed-

: September 10, 2003

For

MAR 1 4 2006

USE OF ANTIBODIES AGAINST

THE MUC18 ANTIGEN

Art Unit

1643

Class/Sub-Class

424/142.1

Examiner

David J. Blanchard

CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

March 10, 2006

(Qate)

Sheila R. Gibson, Reg. No. 54,120

MAIL STOP ISSUE FEE

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Dear Sir:

Enclosed for filing is the Issue Fee for the above-identified application:

- (X) Form PTOL-85.
- (X) A check in the amount of \$1700 is enclosed for the following fees:
 - (X) \$1,400 Issue Fee
 - (X) \$300 Publication Fee
- (X) Return prepaid postcard.

The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Account No. 11-1410.

Sheila R. Gibson

Registration No. 54,120 Attorney of Record Customer No. 20,995

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